



FERN GULLY FOREST SCHOOL ENROLLMENT FORM

Date _____

Personal Information:

Childs Name _____ Birthdate _____

Nickname/Pronouns _____ Age _____

Parents/Guardians:

_____ Phone _____

Email _____

_____ Phone _____

Email _____

Address _____

General Availability during school hours and/or Special Instructions for Contacting you:

Emergency Contact: Name & Relationship (other than parent/guardian)

1) _____ Phone _____

2) _____ Phone _____

Additional people who have permission to pick up your child (must give prior written notice):

_____ Phone _____

_____ Phone _____

Registration (please check all that apply):

9am-1pm _____ 1-3pm _____ Homeschool Enrichment 9:30-3:30pm _____

Mondays _____ Tuesdays _____ Wednesdays _____ Thursdays _____ Fridays _____

Service Details

Beginning date needing care & end date (if applicable):

Your Child's Health Record

General state of health:

Doctor's name _____

Doctor's phone number _____

Does your child have any known allergies/food intolerances or restrictions? _____

Are you ok with your child occasionally enjoying tea or allergy-friendly snacks we provide?

Does your child have any medical conditions which we should be aware of?

Does your child have any speech, hearing, or visual impairments?

Does your child have any special developmental or learning needs we should be aware of?

If so, what techniques do you use to support them?

Does your child have any restrictions to play or activities? _____

About Your Child

Are there any recent big changes your child has been exposed to such as a death in the family, divorce, new sibling etc.?

What is your child's general temperament?

What are their hobbies, interests, and passions? What gets them excited and what helps them calm?

Can your child be relied upon to communicate their needs and are there any special instructions?

Anything else you think it's important for us to know regarding your child:

Tuition:

What Sliding Scale Tier will you be Paying?

- _____ Supported (Families who have Financial Needs/Low income)
- _____ Sustained (Families who are Financially Stable and able to Pay the True Cost of the Program)
- _____ Supporting (Families who are Financially Abundant and able to Pay more to Support Others)

Registration

The registration fee can be submitted by cash or check in-person or online at this [link](#).

Please include a note with your child/children's name(s) and the day(s) you are registering for.

Enrollment Deposit: There is a \$200 deposit required to complete enrollment. Enrollment Deposits are applied to your last month of care and are refundable only with a 30-day cancellation notice.

- **Please fill out this application**, then email it to: ferngullyschool@gmail.com
- **You will need to sign the release form on the first day of school**

For monthly tuition we prefer cash or check in-person or mail to:

Fern Gully Forest School
2210 15th Ave SE
Olympia, WA 98501

Payment Arrangements

Tuition is due on the first of each month. If needed, with a written request, we can set up payment arrangements to pay bi-monthly or on a different schedule than the first of each month.

Enrollment Agreement

- I/we have received a copy of the Fern Gully School Policy and Parent handbook. I/we have read, understand and agree to abide by the policies contained therein. I/we understand that if the policies outlined in this handbook were not adhered to, it would be sufficient cause for the removal of the child/children from the program.
- I/we agree to give 30 days' written notice of my/our intent to not continue/withdraw my/our child/children from the program in order for the deposit to be applied to the last month's tuition. If this notice is not given, I/we agree that we forfeit any deposit made and need to make full tuition payment for the month.
- I/we understand that a \$50 late payment fee (per child) for any payment not received by the fifth of the month, unless a payment plan has been worked out in advance.
- I/we understand that it is important to drop off and pick up on time and that a \$5 late fee (per child) will be applied every 5 minutes after the 10-minute grace period for pickup time.

Name _____ Date _____